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## BIB DATA SHEET

CONFIRMATION NO. 5866

|   |   |                               |   |   |                                |
|---|---|-------------------------------|---|---|--------------------------------|
| <b>SERIAL NUMBER</b><br>10/675,064  | <b>FILING or 371(c) DATE</b><br>09/30/2003<br><b>RULE</b>   | <b>CLASS</b><br>623           | <b>GROUP ART UNIT</b><br>3738   | <b>ATTORNEY DOCKET NO.</b><br>1671-0275 |                                |
| <b>APPLICANTS</b><br>Gary D. Barnett, Wabash, IN;<br>Scott C. Brown, Warsaw, IN;<br>Mark B. Lester, Warsaw, IN;<br><b>** CONTINUING DATA *****</b><br><b>** FOREIGN APPLICATIONS *****</b><br><b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b><br>12/23/2003        |   |                               |   |   |                                |
| Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>Verified and /BRUCE EDWARD SNOW/<br>Acknowledged Examiner's Signature | <input type="checkbox"/> Met after Allowance<br>Initials  | <b>STATE OR COUNTRY</b><br>IN | <b>SHEETS DRAWINGS</b><br>10  | <b>TOTAL CLAIMS</b><br>20               | <b>INDEPENDENT CLAIMS</b><br>3 |
| <b>ADDRESS</b><br>Maginot, Moore & Beck LLP<br>Chase Tower<br>111 Monument Circle, Suite 3250<br>Indianapolis, IN 46204-5109<br>UNITED STATES   |   |                               |   |   |                                |
| <b>TITLE</b><br>Modular long bone prosthesis for partial or total bone replacement  |   |                               |   |   |                                |
| <b>FILING FEE RECEIVED</b><br>1150  | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                               | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees (Filing)<br><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)<br><input type="checkbox"/> 1.18 Fees (Issue)<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |   |                                |